

2024-2025 Independent V4 Worksheet Identity and Statement of Educational Purpose Office of Financial Aid

| Student's Informatio | <u>n</u> | | |
|--|--|---|---|
| Student's Last Name | Student's First Name | Student's M.I. | CBC ID # |
| Student's Phone Number | | | Date of Birth |
| If returning this form please complete back | | e this front page only | If you are returning this form by mail, |
| | | atement of Education Signed at the Institution | |
| unexpired valid gover other state-issued ID, | nment-issued photo iden or passport. The institution | tification (ID), such as, on will maintain a cop | his or her identity by presenting an but not limited to, a driver's license, of the student's photo ID that is at the institution authorized to collect the |
| In addition, the stude | nt must sign, in the prese | nce of the institutiona | l official, the following: |
| | Stateme | nt of Educational Purp | oose |
| Educational Purpose | rint Student's Name) and that the federal stude and to pay the cost of att | ent financial assistance | igning this Statement of I may receive will only be used for College for 2024-2025. |
| Student Signature | | | te |

Identity and Statement of Educational Purpose (To Be Signed in the Presence of a Notary)

If the student is unable to appear in person at <u>Coastal Bend College</u> to verify his or her identity, the student must provide to the institution:

- (a) A copy of the unexpired valid government-issued photo identification (ID) that is acknowledged in the notary statement below, or that is presented to a notary, such as, but not limited to, a driver's license, other state-issued ID, or passport; and
- (b) The original Statement of Educational Purpose provided below, which must be notarized. If the notary statement appears on a separate page than the Statement of Educational Purpose, there must be a clear indication that the Statement of Educational Purpose was the document notarized.

Statement of Educational Purpose

| I certify that I | am the individual signing this Statement of Educational |
|---|--|
| (Print Student's Name) | |
| Purpose and that the federal student finance purposes and to pay the cost of attending 6 | cial assistance I may receive will only be used for educational Coastal Bend College for 2024-2025. |
| Student Signature | Date |
| Student ID number | |
| | Certificate of Acknowledgement |
| State of | |
| City/County of | |
| | |
| (Date) | (Notary's name) |
| | , and provided to me |
| • | ame of signer) |
| on basis of satisfactory evidence of identific | |
| | (Type of government-issued photo ID provided) |
| to be the above-named person who signed | the foregoing instrument. |
| WITNESS my hand and official seal (seal) | |
| • • | (Notary Signature) |
| My commission expires on | |
| (Da | te) |

Coastal Bend College does not discriminate on the basis of race, creed, color, national origin, gender, age or disability.